

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TID		10/14/99
O.I.P.E. CLASSIFIER		12	10/20
FORMALITY REVIEW	Ann	59229	11-1-99

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	10-13-99
2	✓	✓	10-22-99
3	✓	✓	10-22-99
4	✓	✓	10-22-99
5	✓	✓	10-22-99
6	✓	✓	10-22-99
7	✓	✓	10-22-99
8	✓	✓	10-22-99
9	✓	✓	10-22-99
10	✓	✓	10-22-99
11	✓	✓	10-22-99
12	✓	✓	10-22-99
13	✓	✓	10-22-99
14	✓	✓	10-22-99
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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